## DISTRICT HEALTH DEPARTMENT NO. 2 ENVIRONMENTAL HEALTH DIVISION COMPLAINT FORM



Location of Complain	25 Skyler trail		<u></u>	
City Hubbard La	Ka Township Cal	edinia County Ala	70410	
Bronorty Owners Nam	e Michael & Su	Sen Mackeridge		
Froperty Owners Mail	ing Address 2000	Be FField Yps	Lasti M: 49 190	
Property Owners Wan	onific that is the def	who of land	XCe33; Ve Noise	
Complaint (please be sp	ecinc) UNINGENZEZ	V Concara, Tressp	CompEM	
and pisturage	The 127 1 6	weller pressp	uss, campilie	
The total	Fire Hazzard in 6	1 to Comes 6.9 mi 5	of Townshor Course of	
Road Directions to Site	V) HUBBARA LAKE TIZH	- Ga alch to Allahi	or principle and Said	
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Complainants Name (F				
Complainants Signatus		The second secon		
Complainants Mailing A	.ddress	and the second of the second o		
Confidentiality cannot release of information thealth Officer and/or a	be guaranteed, should legal, a regarding this complaint, this court order.	A la fion Ravenge and Baready is administrative and/or court as document may be released up	tion be initiated for the boon authorization of the	
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		Rec'd By		
Staff Handling	Da	te(s) Investigated		
Investigation Revealed:			The state of the s	
Method of Handling		The state of the s		
Date of Resolution				
Rev 11-28-11	Disease raturn this form to V	our respective DHD # 2 office.		
DHD #2	DHD #2	DHD #2 420 W. Lake St POB 98	DHD #2 393 \$ Mr Tom	
630 Progress West Branch MI 48661	311 Lake St. POB 218 Harrisville MI 48740	Tawas City MI 48764-0098	Mio MI 48647	
Public Eli-Compinionium co <sup>2</sup> 80 m		ç.	omputer #	

## DISTRICT HEALTH DEPARTMENT NO. 2

## ENVIRONMENTAL HEALTH DIVISION COMPLAINT FORM

Location of Complaint: Street Address 352	5 Skyler Trai											
		aledonia County Al										
Property Owners Name <u>Michael &amp; Susan Mackeridge</u> Property Owners Mailing Address <u>Zobb Sheffield Ypsilanti</u> , mt 49198  Complaint (please be specific) <u>Excessul noise</u> , <u>Tresspassing</u> , fire hazzard, complete  disregard for any zoning or building ordinance Isani Tation concern, complete												
							Road Directions to Site (N) Hubband Lake Truit to Cones (.9 m. Sof Frackey such					
							Complainants Name (Pri					
Complainants Signature												
Complainants Mailing Address												
•		<del>- / · · · · · · · · · · · · · · · · · · </del>										
Confidentiality: Is the con If yes, reason why confiden	Confidentiality: Is the complainant requesting to be a "confidential informant" X Yes No  If yes, reason why confidentially is requested: retained.											
release of information reg Health Officer and/or a co	arding this complaint, this ourt order.	administrative and/or court as document may be released u	pon authorization of the									
		TMENT USE ONLY										
Date Rec'd	Re	Rec'd By										
		ate(s) Investigated										
Investigation Revealed:												
Method of Handling												
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Date of Resolution												
Rev 11-28-11 P.		our respective DHD # 2 office.	D11D #0									
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